GOVERNMENT OF INDIA
HEALTH AND FAMILY WELFARE
LOK SABHA

UNSTARRED QUESTION NO:4014
ANSWERED ON:20.04.2005
SPREAD OF DISEASES
Mahtab Shri Bhartruhari

Will the Minister of HEALTH AND FAMILY WELFARE be pleased to state:

(a) the details of the States where diseases like Filaria, Malaria and Encephalitis are spreading rapidly;

(b) whether the Government has sent any team of experts for spot study of situation during the recent past;

(c) if so, the findings of the said team;

(d) the central assistance given to each State to combat these diseases during the last three years and the current year so far; and ;

(e) the steps taken/proposed to be taken to control these diseases?

Answer

THE MINISTER OF STATE IN THE MINISTRY OF HEALTH & FAMILY WELFARE(SMT. PANABAKA LAKSHMI)

(a): Filaria is a chronic disease endemic in 20 States and Union Territories. There is no report of rapid spread of filaria to newer areas in recent years.

As per the provisional reports received from State Health authorities, annual incidence of malaria for the country has declined in 2004 to 1.73 million cases as against 1.86 million in 2003. Incidence of Japanese encephalitis is also reported to have declined to 1695 in 2004 as against 2568 in 2003.

However, marginal increase in malaria incidence has been reported from Gujarat, Haryana, Kerala, Madhya Pradesh, Maharashtra, Punjab, Tripura, Chandigarh and D&N Haveli. Increase in incidence of Japanese encephalitis was reported only in Assam, Bihar and West Bengal.

(b) & (c): Central teams visit different States to provide on the spot technical support to the States for effective control of vector borne diseases. In recent past, teams have visited Gujarat, Madhya Pradesh, Maharashtra, and Punjab. The teams have reviewed the situation and identified areas requiring priority actions which include:-

i. Strengthening of surveillance which is inadequate mostly due to large number of vacancies among key functionaries like health workers, laboratory technicians and supervisors, to ensure early diagnosis and prompt treatment.

ii. Expansion and strengthening access to medicines through network of Drug Distribution Centres and Fever Treatment Depots.

iii Strengthening integrated vector control through indoor insecticide spray, larvivorous fish, insecticide treated nets and environmental methods.

Strengthening intersectoral collaboration, IEC activities and social mobilization.

(d): The central assistance to States includes cash as well as commodities like medicines, insecticides etc. as per approved policies. The programme implementation is the responsibility of the State Governments. The State-wise central assistance provided is given in Annexure.

(e): A National Vector Borne Disease Control Programme

(NVBDCP) covering control programme for Malaria, Filaria, Kala- azar, Dengue, Japanese Encephalitis with 3 ongoing centrally sponsored schemes namely National Anti Malaria Programme, National Filaria Control Programme and Kala-azar Control Programme is being implemented since October, 2003. The Government of India provides assistance in the form of insecticides, larvicides, and drugs for treatment of these diseases to all the States. In addition, North Eastern States and UTs are also provided cash assistance to meet the operational cost for implementation of the programme. 100 Districts covering 1045 PHCs in 8 States namely Andhra Pradesh, Chhatisgarh, Jharkhand, Madhya Pradesh, Maharashtra, Rajasthan, Orissa and Gujarat are also being provided 100% cash assistance to meet the operational cost for implementation of the programme under World bank assisted

Enhanced Malaria Control Project Under this project cash assistance is also provided to other states for training and IEC activities. The strategies for prevention and control of these vector borne diseases include:-

i Early diagnosis and prompt treatment ii Integrated vector control through indoor residual insecticide spray, anti-larval operations including use of larvivorous fish & environmental management and personal protection by use of insecticide treated nets. iii Epidemic preparedness and response. iv Information Education and Communication and social mobilization. v Capacity building.

For Filaria elimination by the year 2015 as per National Health Policy goal, annual mass drug administration is being undertaken in filaria endemic districts.

Annexure

Statement showing State-wise Expenditure for 2001-2002, 2002-03 & 2003-04 under NVBDCP

States/UTS	2001-02 Expenditure	2002-03 Expenditure	2003-04 Expenditure
Andhra Pradesh	954.64	548.86	534.73
Arunachal Pradesh	364.97	377.08	112.63
Assam	2377.47	1935.83	1364.15
Bihar	873.90	198.35	2789.16
Chhattisgarh	876.31	3047.95	1739.99
Goa	6.19	7.97	18.55
Gujarat	1,353.89	767.99	380.99
Haryana	18.43	67.21	37.35
Himachal Pradesh	36.78	11.89	4.90
J & K	69.62	62.44	72.30
Jharkhand	883.78	1671.15	1296.86
Karnataka	386.48	227.36	264.87
Kerala	67.75	13.31	214.55
Madhya Pradesh	2540.80	2408.15	1333.71
Maharashtra	2,289.20	947.11	463.30
Manipur	275.27	144.86	69.71
Meghalaya	292.98	301.70	323.35
Mizoram	345.85	190.50	275.68
Nagaland	368.08	372.14	386.20
Orissa	1,745.06	3030.80	2512.78
Punjab	94.10	65.75	37.87
Rajasthan	924.92	925.90	1415.59
Sikkim	0.14	4.32	2.42
Tamil Nadu	289.03	187.39	279.06
Tripura	505.76	389.93	428.63
Uttar Pradesh	671.41	607.31	744.61
Uttaranchal	39.18	1.96	39.17
West Bengal	1,140.73	518.97	616.94
Delhi	89.55	58.47	80.67
Pondicherry	8.30	13.18	11.12
A&N Islands	220.75	230.07	203.33
Chandigarh	34.87	38.29	25.36
D& N Haveli	40.67	16.07	60.72
Daman & Diu	18.65	7.99	19.29
Lakshadweep	5.92	5.35	12.06
Total	20,211.43	19403.60	18172.60
Cash for States other than NE	-	0.00	0.00
Commd.Misc.	0	0.00	1928.31
Estt./Res.Pub	1,767.16	1278.00	-